

## **BEHAVIOR CONSULTATION I (BC1)**

### **General Description:**

Behavior Consultation I (BC1) services provide individually designed one-on-one interventions to replace the person's targeted behaviors with socially acceptable appropriate behaviors that increase the person's ability to be integrated into the community. The BC1 Contractor provides services to people whose behavior problems may be emerging, annoying, worrisome, objectionable, singular but not dangerous, and may interfere with learning or social relationships. The Contractor provides individualized behavior consultation to families and/or staff who support people with non-serious behavior problems. The behaviors of the person shall not constitute an impending crisis, nor shall they be assessed as constituting a serious problem. BC1 services shall be based upon positive behavior supports. BC1 services include complete functional behavior assessment of the targeted behaviors, development of a behavior support plan, monitoring the implementation of plan, training of caregivers and support staff and periodic reassessment of the plan. Services are provided at the person's home or in the community. The Contractor receives referrals for BC1 services through the DHS/DSPD Behavior Consultant Coordinator or designated region staff.

### **Behavior Supports**

1. Behavioral intervention procedures shall be in accordance with DHS/DSPD Administrative Code, Rule R539-4 a copy of which can be found at: <http://www.rules.utah.gov/publicat/code/r539/r539-004.htm>.
2. All Behavior Support Plans shall emphasize a positive approach with effective treatment designed to acquire and maintain adaptive behaviors and prevent problem behaviors.
3. Written Behavior Support Plans shall include the following information:
  - a. A summary of the Functional Behavioral Assessment:
    - i. Describing the problem behavior.
    - ii. Predicting the circumstances in which the problem behavior is most likely to occur.
    - iii. Identifying the function of the problem behavior.
  - b. Baseline data.
  - c. Behavioral objective written in measurable and observable terms.
  - d. Data collection procedures that measure progress toward the Behavior Support Plan objectives.
  - e. Behavioral intervention procedures clearly written in detail to ensure consistent implementation by staff/supporters addressing the following areas:
    - i. Prevention procedures designed to decrease the need for the problem behavior.
    - ii. Planned responses and consequences for when the problem behavior occurs -- this includes safety issues and efforts to minimize reinforcement for the problem behavior.
    - iii. Teaching or increasing replacement behaviors.

- iv. When appropriate, the Behavior Support Plan shall also address generalization, maintenance, and fading procedures.
- f. When Level II and Level III intrusive procedures are used, include a rationale for the use of intrusive procedures and a plan to discontinue the intrusive intervention over time. (See Administrative Code, Rule R539-4-1-3 definitions.)
- g. Name and title of the Contractor/Employee who developed the Behavior Support Plan and name of the employee(s) responsible for supervising the implementation of the plan.
- h. Dates for review and plan revisions in addition to required monthly summary.
- i. Graphed data of the primary problem behavior(s) updated at least every 3 months for visual analysis.
- j. The written approved Behavior Support Plan shall be available to all persons involved in implementing or supervising the plan.

### **Eligibility Description**

BG SPINAL CHORD GENERAL FUND

SG SELF DETERM NON-MEDICAID

SM WAIVER\_MEDICAID

### **Population Served**

The person shall be found eligible under the DHS/DSPD eligibility criteria and shall be receiving other services or shall be on the DHS/DSPD waiting list. All persons served shall have special behavioral needs such as aggression, self-injurious, property destruction, non-compliance, eating and toileting problems. The BC1 Contractor shall focus on people with mental retardation or related condition (MR.RC) or on adults with acquired brain injury (ABI). BC1 services may be provided at the person's home, a programmatic setting, or other naturally occurring environment in the community.

### **Contractor's Qualifications**

The Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor must also agree to participate in any DHS/DSPD provided Medicaid training. The Contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code § 62A-5-103. <http://www.le.state.ut.us/~code/TITLE62A/62A05.htm>.

The Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code, Rule R501 found at <http://rules.utah.gov/publicat/code/r501/r501.htm> to operate and provide the particular

type of services being offered and comply with insurance requirements and any local ordinances or permits.

### **Staff Qualifications**

The Contractor's BC1 staff must agree to be actively engaged in training provided by DHS/DSPD in positive behavioral supports and possess a Bachelors degree in a related field and any combination of training and experience of at least one year's length working with people who have mental retardation, related conditions or adults with acquired brain injury. Staff shall successfully complete a training course in the provision of positive behavioral supports prescribed by DHS/DSPD and approved by the State Medicaid Agency and shall successfully pass a learning assessment at the conclusion of the course.

The Contractor's staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record as required by Utah Administrative Code, Rule R501-14.  
<http://rules.utah.gov/publicat/code/r501/r501-14.htm>.

### **Staff to Person Ratios**

Behavioral Consultation shall be one to one (1:1) service.

### **Record Keeping and Written Documentation**

In order to assure the person's needs are being met and to assist DHS/DSPD in its efforts to evaluate the effectiveness of services, a copy of the following information shall be forwarded to DHS/DSPD within 30 days of its completion and shall be kept on file by the Contractor:

1. Functional Behavior Assessment
2. Behavior Support Plan
3. Follow-up Summary/Evaluation
4. Monthly summaries of the BC1 services

In order to document the provision of BC1 services, the Contractor shall develop and maintain sufficient written documentation to support the following:

1. Number of hours worked and activity;
2. Applicable licensure and certification;
3. Documentation of training(s) provided with topic, dates, names of attendees; and,

4. An approved referral as indicated on DHS/DSPD Form 1056 in the case of those receiving supports from DHS/DSPD, and on an alternative written document in the case of those awaiting services that assures compliance with DHS/DSPD eligibility requirements and can be compared with invoices.

#### **Individual Assessment and Treatment Plan**

1. The Contractor shall maintain written documentation and shall comply with Administrative Code, Rule R539-4.  
<http://rules.utah.gov/publicat/code/r539/r539.htm>.
2. Support Plans Objectives and Outcomes. The Contractor shall be expected to establish individual objectives and track outcomes. DHS/DSPD defines a successful outcome for these services as a decrease in the behavior problem being addressed and the maintenance or increase in the frequency of occurrence of the replacement behavior.

#### **Limitations:**

1. Services provided by the Contractor cannot duplicate other supports and services available to the person. In addition, they must be cost efficient and demonstrate effectiveness for the intended use.
2. The Contractor may not provide direct care for persons or transport persons for whom they are simultaneously providing behavioral consultation.
3. Behavior Support Plans developed by the Contractor are prohibited from including any of the following:
  - a. Corporal punishment, examples: slapping, hitting, and pinching;
  - b. Demeaning speech to a person that ridicules or is abusive;
  - c. Seclusion -- defined as locked confinement in a room;
  - d. Use of electric devices or other painful stimuli to manage behavior;
  - e. Denial or restriction of access to assistive technology; except where removal prevents injury to self, others, or property; or,
  - f. Withholding of meals as a consequence or punishment for problem behavior.
4. Behavior Support Plans that include Level II or Level III intrusive behavior intervention procedures require DHS/DSPD review and approval (Reference Administrative Code, Rule R539-4.  
<http://rules.utah.gov/publicat/code/r539/r539.htm>. The Contractor may develop plans that include Level II or Level III interventions provided that these plans are developed in consultation with and reviewed by a BC2 or BC3 consultant and the BC1 Contractor is NOT involved with developing or monitoring that portion of the plan that contains intrusive interventions. The Contractor may provide follow-up services for behavioral plans developed and monitored by BC2 or BC3

contractors. Only BC2 and BC3 contractors may develop Behavior Support Plans that include Level II or Level III intrusive behavior interventions.

5. This service shall not be available to persons who might otherwise receive this service through the Medicaid State Plan or any other funding source.
6. Anyone providing BC1 services who is separated from employment as a BC1 provider *for cause* shall be immediately de-certified by DHS/DSPD and shall not be eligible for reinstatement of his/her certification to provide BC1 services. However, should the separation from employment as a BC1 provider for cause be reversed by a court or agency of appropriate jurisdiction, then such certification to provide BC1 services will be immediately restored by DHS/DSPD.